



**FLORIDA AGRICULTURAL AND MECHANICAL UNIVERSITY
REGISTRAR'S OFFICE**

111 Foote-Hilyer Administration Center
Tallahassee, FL 32307-3200

Office: (850) 599-3115 Fax: (850) 561-2428 Email: registrar@famu.edu

OVERLOAD AUTHORIZATION FORM

FAMU STUDENT ID#	NAME	TERM/YEAR	DATE										
<table border="1" style="width:100%; height:20px; border-collapse: collapse;"> <tr> <td style="width:25px;"></td><td style="width:25px;"></td><td style="width:25px;"></td><td style="width:25px;"></td><td style="width:25px;"></td><td style="width:25px;"></td><td style="width:25px;"></td><td style="width:25px;"></td><td style="width:25px;"></td><td style="width:25px;"></td> </tr> </table>											_____	_____	_____
<small>(PLEASE DO NOT ENTER YOUR SOCIAL SECURITY NUMBER)</small>													

CLASSIFICATION: Freshman Sophomore Junior Senior Graduate

COURSE(S)

SUBJECT			CATALOG NUMBER				SECTION NUMBER			UNITS/ CREDIT HOURS	CLASS NO./REF.NO (REQUIRED)				PERMISSION NUMBER	INSTRUCTOR SIGNATURE
E	N	C	1	1	0	1	0	0	3	4	3	5	6	7	203000	<i>Dr. John Doe</i>

Student's Signature: _____

Official Signature is required. Do Not Type Your Signature.

Overrides for Unit Overload require signatures of the student, student's chairperson and dean for 19 to 20 hours, and Provost's signature for 21 hours.

Chairperson Signature: _____ Dean Signature: _____ Provost Signature: _____